

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	HL		6-5-01
O.I.P.E. CLASSIFIER		8	6-14-01
FORMALITY REVIEW	ET	926	08-01-01
RESPONSE FORMALITY REVIEW			

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Date
Final	
Original	
1	✓
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7	✓
8	✓
9	✓
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11	✓
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17	✓
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Claim	Date
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91	✓
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Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
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